05/14/2008 09:15

Image# 28991002736

# FORM 3X

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

		For Oth	er inan An	Autnorize	ea Comm	Ittee		Office Us	se Only	
1.			MAILING LA		xample:If typi ver the lines	ing, type				
Ш	American College of Cardiolog	gy Political	Action Comm	ittee						
Ш							1 1 1			
AD	DRESS (number and street)	2400 N	I St NW							
	Check if different									
L	than previously reported. (ACC)	Washi	ngton				DC	2	0037	1153
2.	FEC IDENTIFICATION NUM	BER 1	_	CITY 🛕			STATE	<b>4</b>	ZIPCODI	Ē 🛕
	C00375360			3. IS THIS REPOR	Т	NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	Ì΄R	lonthly leport	Feb 20 (M2	<u>2</u> ) X	May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:			Mar 20 (M	3)	Jun 20 (M6)		Sep 20 (M9)	_	Dec 20 (M12) (Non-Election Year Only)
	April 15			Apr 20 (M4	<b>!</b> )	Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Quarterly Report(Q1	1) (c	) 12-Day		Primary (1	2P)	Ger	neral (12G)		Runoff (12R)
	July 15 Quarterly Report(Q2	' '	PRE-Election			-		=		
	October 15 Quarterly Report(Q3	3)	Report for t	he:	Conventio	n (12C)	Spe	ecial (12G)		
	January 31 Quarterly Report(YE	≣)		Election on					in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)	Post -Election					Runoff (30R) Special (30			Special (30S)
	Termination Report (TER)		·	Election on					in the State of	
5.	Covering Period 0 4	0	1 200	8	through	h 04	30	2008		
I ce	ertify that I have examined this R			my knowledge	and belief it	t is true, correc	t and com	plete.		
Тур	e or Print Name of Treasurer	Richa	rd Goldberg							
Sig	nature of Treasurer Electron	nically Filed	d by Richard	l Goldberg			Date	05 14	1 2	2008
NO	TE : Submission of false, erron	eous, or ir	ncomplete infor	mation may s	ubject the pe	erson signing th	nis Report	to the penalties	of 2 U.S.	C 437g.
	Office Use							l l	FORN	

FE6AN026

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

R		04 01 2008	To: 0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
i.	(a) Cash on Hand  January 1  Ž008  Y  Y		268897.92
	(b) Cash on Hand at Begining of Reporting Period	203357.27	
	(c) Total Receipts (from Line 19)	49457.54	147282.26
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	252814.81	416180.18
	Total Disbursements (from Line 31)	36568.86	199934.23
i.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	216245.95	216245.95
).	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	·		
υ.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

0 1 3<sup>D</sup>0 м м 0 4 2008 м м 0 4 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 117143.66 44738.33 (i) Itemized (use Schedule A) .......... 4257.00 27866.66 (ii) Unitemized ..... (iii) TOTAL (add 48995.33 145010.32 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 48995.33 145010.32 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 462.21 2271.94 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 49457.54 147282.26 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts 49457.54 147282.26 (subtract Line 18(c) from Line 19) .....

23.

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 568.86 2334.23 Expenditures..... (c) Total Operating Expenditures 568.86 2334.23 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to Federal Candidates/Committees.....and Other Political Committees..... 33500.00 195000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 27. Loans Made..... 0.00 28. Refunds of Contributions To: Individuals/Persons Other 2500.00 2600.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 2500.00 2600.00 (add Lines 28(a), (b), and (c)) ......... 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 36568.86 199934.23 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

36568.86

199934.23

from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	48995.33	145010.32
34.	Total Contribution Refunds (from Line 28(d))	2500.00	2600.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	46495.33	142410.32
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	568.86	2334.23
37.	Offsets to Operating Expenditures (from Line 15, page 3)	462.21	2271.94
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	106.65	62.29

FE6AN026

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	name and address of any political com	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jay H. Alexander  Mailing Address 2256 Carlyle Court  City Buffalo Grove  FEC ID number of contributing federal political committee.  Name of Employer North Shore Cardiologists, SC  Receipt For: Primary General Other (specify)	State Zip Code IL 60015-1857  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   1300	
Full Name (Last, First, Middle Initial) Jay H. Alexander  Mailing Address 2256 Carlyle Court  City  Buffalo Grove  FEC ID number of contributing federal political committee.  Name of Employer North Shore Cardiologists, SC  Receipt For:  Primary General Other (specify)	State Zip Code IL 60015-1857  C  Occupation ADULT CARDIOLOGY Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) William B. Bauman Mailing Address 670 Pine Point Drive  City Akron  FEC ID number of contributing federal political committee.  Name of Employer Summa Health System  Receipt For:  Primary General Other (specify)	State Zip Code OH 44304-1473  C  Occupation INTERVENTIONAL CARDIOL Aggregate Year-to-Date  500	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1200.00

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 42 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Cardiology Pol	the name and ad	dress of any political committee to	on for the purpose of soliciting contributions
∠ <b>4.</b>	Full Name (Last, First, Middle Initial) Jennifer Ray Beckman  Mailing Address 3208 East Colonial  City Orlando	Drive Suite 26 State FL	4 Zip Code 32803-5127	Date of Receipt    M M
	FEC ID number of contributing federal political committee.	C		2501.00
	Name of Employer Florida Chapter, American College of C Receipt For:  Primary  General Other (specify) ▼		e Director e Year-to-Date ▼  2501.00	
- З.	Full Name (Last, First, Middle Initial) Shashikumar S. Bellur Mailing Address 600 Riverpointe Driv	Date of Receipt  0 4 0 9 2 0 0 8		
	City	State	Zip Code	Transaction ID: 2daf43e2849c4bf2aa49
	Conroe	TX	77304-2867	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed		CARDIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- ).	Full Name (Last, First, Middle Initial) Michael N. Boriss	Date of Receipt		
	Mailing Address 1002 Willets Road			04 04 2008
	City Marmora	State NJ	Zip Code	Transaction ID: d94a6e203d6e4e72903
	FEC ID number of contributing federal political committee.	C	08210-1968	Amount of Each Receipt this Period  250.00
	Name of Employer Regional Heart and Lung Associates Receipt For:  Primary  General  Other (specify)		on CARDIOLOGY e Year-to-Date ▼	7
	SUBTOTAL of Receipts This Page (optional	)		3001.00
	TOTAL This Period (last page this line numb	per only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic			on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick C. Breaux Mailing Address 1317 Killdeer Street  City New Orleans  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General		Zip Code 70121  on VASIVE CARDIOLOGY e Year-to-Date ▼ 250.00	Date of Receipt  O 4  O 4  Transaction ID: 111406240d7149e1bd56  Amount of Each Receipt this Period
– В.	Full Name (Last, First, Middle Initial) Alan S. Brown Mailing Address 1912 Alta Vista Court 801 S Washington Stri City Naperville	eet State	Zip Code 60567	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.  Name of Employer Midwest Heart Specialists  Receipt For:  Primary General Other (specify)		on CARDIOLOGY e Year-to-Date ▼	100.00
_ C.	Full Name (Last, First, Middle Initial) Vincent J. Bufalino Mailing Address 583 Hill Avenue  City Glen Ellyn  FEC ID number of contributing federal political committee.  Name of Employer Midwest Heart Specialists-	State IL C	Zip Code 60540-7430	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Г	Midwest Heart Specialists- Edward Heart Receipt For: Primary General Other (specify)	ADULT	CARDIOLOGY e Year-to-Date ▼  250.00	
-	SUBTOTAL of Receipts This Page (optional)			600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Cardiology Po	nd Statements may not be sold or used by any person the name and address of any political committee to olitical Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) Linda P. Calhoun Mailing Address 106 Chimney Lane City Wilmington FEC ID number of contributing federal political committee.  Name of Employer Wilmington Cardiology PLLC	State Zip Code NC 28403-5345  C Occupation CLINICAL CARDIOLOGY/GENERAL	Date of Receipt  0 4 0 5 2 0 0 8  Transaction ID: 7418d3346b1f4225a9c3  Amount of Each Receipt this Period  500.00			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Dennis A. Calnon Mailing Address 7300 Penneyroyal	Place	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y			
City  Dublin  FEC ID number of contributing federal political committee.	State Zip Code OH 43214-3467	Transaction ID: 4e637cfe2fa549b1a31f  Amount of Each Receipt this Period  250.00			
Name of Employer Ohio State University Hospital Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation ADULT CARDIOLOGY Aggregate Year-to-Date  250.00				
Full Name (Last, First, Middle Initial)  Michael P. Cecil  Mailing Address 4103 Club Drive, N	Michael P. Cecil				
City Atlanta FEC ID number of contributing	State Zip Code GA 30014-2562	Transaction ID: dacb2bcda43d4d60a26d  Amount of Each Receipt this Period			
federal political committee.  Name of Employer Georgia Heart Specialists	Occupation ADULT CARDIOLOGY	500.00			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00				
SUBTOTAL of Receipts This Page (options	J	1250.00			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 42 (check only one)    X				
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American College of Cardiology F	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) Hollace D. Chastain Mailing Address 1819 Breamar Dri	ve	Date of Receipt				
City Fort Wayne FEC ID number of contributing	State Zip Code IN 46805-4705	Transaction ID: 4c0b8dbd9ac5d0bcb0 <sup>-1</sup> Amount of Each Receipt this Period  100.00				
Receipt For:  Primary  Other (specify)  General	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼  400.00					
Full Name (Last, First, Middle Initial) Bernard A. Clark	Full Name (Last, First, Middle Initial)					
City Glastonbury FEC ID number of contributing federal political committee.	State         Zip Code           CT         06105-1208	Transaction ID: 1b903e247e31410ea2  Amount of Each Receipt this Period  250.00				
Name of Employer St. Francis Hospital and Medical Cente Receipt For:  Primary General Other (specify) ▼	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼  450.00					
Full Name (Last, First, Middle Initial) Bernard A. Clark Mailing Address 95 Johnny Cake L	ane	Date of Receipt				
City  Glastonbury  FEC ID number of contributing	State Zip Code CT 06105-1208	Transaction ID: 481a830e23565620b7  Amount of Each Receipt this Period				
federal political committee.  Name of Employer St. Francis Hospital and Medical Cente	Occupation ADULT CARDIOLOGY	50.00				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00					
SUBTOTAL of Receipts This Page (option	nal)	400.00				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 42 (check only one)    X   11a
•	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial)  Mark W. Clark  Mailing Address 1 Waterford Circle			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Hampton</u>	State VA	Zip Code 23666-6601	Transaction ID: 39f94d7e22b74c6f8cce  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Tidewater Heart Specialis- ts Receipt For:  Primary General Other (specify) ▼		on CARDIOLOGY e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Lianna S. Collinge  Mailing Address 4308 88th Avenue Nor	Date of Receipt  0 4 1 4 2 0 0 8		
	City	State	Zip Code	Transaction ID: 37b04da8cebe4ded9dfd
	Gig Harbor  FEC ID number of contributing federal political committee.	C	95825-2209	Amount of Each Receipt this Period  2501.00
	Name of Employer California Chapter of the ACC Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		e Director e Year-to-Date ▼ 2501.00	
С.	Full Name (Last, First, Middle Initial) George H. Crossley Mailing Address 276 Stratton Court	<u> </u>		Date of Receipt  0 4 1 4 2 0 0 8
	City	State	Zip Code	Transaction ID: 4bee587491424ed899af
	Brentwood  FEC ID number of contributing federal political committee.	TN	37203-1831	Amount of Each Receipt this Period  1000.00
	Name of Employer St. Thomas Heart	Occupatio	OPHYSIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		3751.00
İ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	Statements may not be sold or used by any personal ename and address of any political committee to local Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) C. James De Sando Mailing Address 10660 E Pantano Tra  City Tucson	il State Zip Code AZ 85730-5529	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:	Occupation ADULT CARDIOLOGY	250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 250.00	
Marco N. Diaz  Mailing Address 20 Cross Hill Road		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City Cape Elizabeth	State Zip Code ME 04107-5115	Transaction ID: 97f0c64ed6794f4a81ed
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  1000.00
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mary L. Dohrmann	•	Date of Receipt
Mailing Address 3904 Frontenac Place	)	04 09 2008
City <u>Columbia</u>	State Zip Code MO 65203-5810	Transaction ID: e5e92abdf4c0461d9c7f  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of Missouri-Co- lumbia, Schoo Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation CLINICAL CARDIOLOGY/GENERAL Aggregate Year-to-Date  250.00	CARDIOLOGY
SUBTOTAL of Receipts This Page (optional) .		1500.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politics	Statements may not be sold or used by any persone name and address of any political committee to cical Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James T. Dove  Mailing Address #7 East Shore Lane  City Springfield  FEC ID number of contributing federal political committee.  Name of Employer Prairie Cardiovascular Consultants, Lt Receipt For: Primary General Other (specify)	State Zip Code IL 62701-1034  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  1000.00	Date of Receipt  M M O 7 2008  Transaction ID: cc5ccab3b9744947b6e  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Hanna M. El-Khouri Mailing Address 43380 Woodward Av  City Bloomfield Hills  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Blair D. Erb Mailing Address 905 Highland Boulev  City Bozeman  FEC ID number of contributing	250.00  ard Suite 4330  State Zip Code MT 59715-6901	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Cardiology Consultants of Bozeman Receipt For: Primary Other (specify)	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   500.00	
		1750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 42 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic			on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>∠</b> <b>A.</b>	Full Name (Last, First, Middle Initial) James V. Faris  Mailing Address 3716 Devonshire Ln  City Bloomington  FEC ID number of contributing federal political committee.  Name of Employer Internal Medicine Associates  Receipt For:  Primary General		ENTIONAL CARDIOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 2 0 0 8  Transaction ID: 4186215211c84416b32c  Amount of Each Receipt this Period  500.00
В.	Other (specify) ▼  Full Name (Last, First, Middle Initial) Ronald M. Gabor  Mailing Address 2394 Northwest 49th Lane Suite# 304  City State Boca Raton FL  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Occupation ADJULT.		Zip Code 33428-1704	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ C.	Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Kirk N. Garratt Mailing Address 130 East 77th Street 9		e Year-to-Date ▼ 250.00	Date of Receipt    M
	City New York FEC ID number of contributing federal political committee.	State NY	Zip Code 10075-1851	Transaction ID: 3954242a89bd41a7a04  Amount of Each Receipt this Period  500.00
	Name of Employer Lenox Hill Hospital  Receipt For:  Primary  General  Other (specify) ▼		CARDIOLOGY  e Year-to-Date  ▼  1500.00	
	SUBTOTAL of Receipts This Page (optional)	I		1250.00

ITEMIZED RECEIPTS	38)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 15 / 42   (check only one)
Any information copied from such Repor or for commercial purposes, other than u	ts and Statements may sing the name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Cardiology	Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) Ray I. Georgeson			Date of Receipt
Mailing Address 123 Renaissand	ce Place		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Statesville	State NC	Zip Code 28677-3425	Transaction ID: fa2219af51a244aeafe Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Piedmont Healthcare-Speci- alists	Occupation ADULT C	n CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Kenneth L. Gibbs	L		Date of Receipt
Mailing Address 9250 South Tro	pical Trail		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Merritt Island	State FL	Zip Code 32901-3183	Transaction ID: 45ff2fbc1010478585  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer The Really Useful Cardiology Company	Occupation INTERVE	n ENTIONAL CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mark R. Gordon			Date of Receipt
Mailing Address 4520 W 69th S	reet		0 4 1 4 2 0 0 8
City Sioux Falls	State SD	Zip Code 57108-8148	Transaction ID: 732ba80debad4420a
FEC ID number of contributing federal political committee.	C	37100-0140	Amount of Each Receipt this Period  250.00
Name of Employer North Central Heart Insti- tute	Occupation ADULT C	n CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (op	tional)		750.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 42 (check only one)    X
_	information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may he name and add	not be sold or used by any persorress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	American College of Cardiology Poli	tical Action Co	mmittee	
۱. <u>غ</u>	Full Name (Last, First, Middle Initial) Sudhir K. Gupta			Date of Receipt
_	Mailing Address 4 Jarrot Drive  Dity	State	Zip Code	0 4 0 5 2 0 0 8  Transaction ID: 36cafb16a85a42cea34
	Shawnee	OK	74804-0007	Amount of Each Receipt this Period
- F	FEC ID number of contributing ederal political committee.	C		250.00
<u>1</u> ;	Name of Employer Self-Employed	Occupation ADULT C	ARDIOLOGY	
Ī	Receipt For:  Primary General  Other (specify) ▼	<del>-                                     </del>	Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) David J. Hale			Date of Receipt
1	Mailing Address 611 Lake Road			0 4
	City	State	Zip Code	Transaction ID: c3bf390ebb10460b9f50
F	Glen Ellyn FEC ID number of contributing ederal political committee.	C	60007-3309	Amount of Each Receipt this Period  250.00
	Name of Employer Cardiovascular Associates SC	Occupation ADULT C	: ARDIOLOGY	7
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) John G. Harold			Date of Receipt
_	Mailing Address 2473 Jupiter Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Los Angeles	State CA	Zip Code 90046-1752	Transaction ID: 873d2ff744b44b29821
F	FEC ID number of contributing ederal political committee.	C	33310 1732	1000.00
<u>(</u>	Name of Employer Cedars-Sinai Medical Cent- er		ARDIOLOGY	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SU	BTOTAL of Receipts This Page (optional)			1500.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 42 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Polit	e name and add	lress of any political committee to	on for the purpose of soliciting contributions
<b>A</b> .	Full Name (Last, First, Middle Initial) Howard L. Haronian Mailing Address 6 Camelback Way  City Westerly  FEC ID number of contributing federal political committee.  Name of Employer Cardiology Specialists, Ltd. & Yale C Receipt For:		Zip Code 02891-2927 ARDIOLOGY Year-to-Date ▼	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Б.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Patrick Hope  Mailing Address 2400 N Street Northw Heart House  City Washington  FEC ID number of contributing	State DC	Zip Code 20037-1152	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee.  Name of Employer American College of Cardiology Receipt For:  □ Primary □ General □ Other (specify) ▼		Legislative Policy Year-to-Date  250.00	250.00
с.	Full Name (Last, First, Middle Initial) Jake H. Ichino Mailing Address 343 Elm Street Suite City Reno FEC ID number of contributing	400 State NV	Zip Code 89503-4541	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For:  Primary  Other (specify)	Occupation CARDIO	/ASC. SURG. Year-to-Date ▼  500.00	
	SUBTOTAL of Receipts This Page (optional) a			1000.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 42 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full)  American College of Cardiology I	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sandeep Joshi  Mailing Address 3824 Brigade Circ Mpc-2 #300  City Carmel  FEC ID number of contributing federal political committee.  Name of Employer The Care Group at Methodist Receipt For:  Primary General	State Zip Code IN 46202  C  Occupation ELECTROPHYSIOLOGY Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) Alan H. Kadish  Mailing Address 9400 Avers 251 E Huron  City  Evanston	State Zip Code IL 60611-2908	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Northwestern Memorial Hospital  Receipt For:  Primary General  Other (specify)	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   250.00	250.00
Full Name (Last, First, Middle Initial) Jerry D. Kennett Mailing Address 1101 Canterbury  City Columbia  FEC ID number of contributing	State Zip Code MO 65203-5217	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee.  Name of Employer Missouri Cardiovascular Specialists Receipt For:  □ Primary □ General Other (specify) ▼	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   1000.00	1000.00
SUBTOTAL of Receipts This Page (optic	onal)	1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Police  American Coll	Statements may not be sold or used by any person the name and address of any political committee to tical Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph M. Kiernan Mailing Address 201 Ridgewood Cou City Vienna  FEC ID number of contributing federal political committee.  Name of Employer Cardiovascular Group, PC  Receipt For: Primary General	State Zip Code VA 22180-3571  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M O 9
Other (specify) ▼  Full Name (Last, First, Middle Initial) Raffi K. Krikorian  Mailing Address 3760 S Lindbergh Bo  City Saint Louis  FEC ID number of contributing federal political committee.  Name of Employer Comprehensive Cardiology Consultants.		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  Vijay S. Kusnoor  Mailing Address 2670 McFaddin Stre  City  Beaumont  FEC ID number of contributing	State Zip Code TX 77702-1621	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee.  Name of Employer Self-Employed  Receipt For:  Primary General Other (specify) ▼	C  Occupation PEDIATRIC CARD.  Aggregate Year-to-Date ▼  1000.00	1000.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2250.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 20 / 42   (check only one)
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Cardiology Political	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	ull Name (Last, First, Middle Initial)	ai Action Co		
	/illiam A. Kutchera			Date of Receipt
M	ailing Address 13822 Arboretum Stree	t		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity .nchorage	State AK	Zip Code 99516-7612	Transaction ID: 1b160c03a1004877b5  Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		250.00
Na Al	ame of Employer laska Heart Institute LLC	Occupatio ADULT (	n CARDIOLOGY	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Ва	ull Name (Last, First, Middle Initial) arry K. Lewis  ailing Address   25806 Island Lake Driv	Date of Receipt		
	ity	State	Zip Code	04 14 2008
	lovi	MI	48334-327 <u>5</u>	Transaction ID: 12796878fd06489884  Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		1000.00
Na Co Po	ame of Employer onsultants in Cardiology, C	Occupatio ADULT (	n CARDIOLOGY	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	ull Name (Last, First, Middle Initial) erre F. Lutz			Date of Receipt
	ailing Address 4627 Shiloh Ridge Trai 1365 Clifton Road Nort	heast		04 10 2008
	ity :nellville	State GA	Zip Code 30322-0001	Transaction ID: 3218a56f0cb54894af  Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	00022 0001	500.00
<u>of</u>	ame of Employer mory University School f MedicineDep	Occupatio ADULT (	n CARDIOLOGY	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUB	BTOTAL of Receipts This Page (optional)			1750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American College of Cardiology F	and Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) George M. Massoud Mailing Address 2200 E First Stree  City Alamogordo  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Kevin J. McCullum Mailing Address 25 Monument Driv City York FEC ID number of contributing federal political committee.  Name of Employer Cardiac Diagnostic Assocs.  Receipt For: Primary General Other (specify)	ve Suite 200  State Zip Code PA 17403-3676  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) J. Scott Millikan Mailing Address 3319 Alpine Drive City Billings FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code MT 59102-0341  C  Occupation CARDIOVASC. SURG.  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: 7a8564f401cf4a4b9c2a  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (option	nal)	1000.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 42 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Cardiology Politic	cal Action Co	ommittee	
A.	Full Name (Last, First, Middle Initial) Michael J. Mirro			Date of Receipt
	Mailing Address 2005 Prestwick Lane			04 14 2008
	City	State	Zip Code	Transaction ID: 2ebc425ed7e44712a9a
	Fort Wayne	IN	46805-4705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Fort Wayne Cardiology	Occupation ADULT (	n CARDIOLOGY	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		650.00	
В.	Full Name (Last, First, Middle Initial) Michael J. Mirro			Date of Receipt
	Mailing Address 2005 Prestwick Lane	0 4 3 0 Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 4f42a10a8b15fb2c58ac
	Fort Wayne	IN	46805-4705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Fort Wayne Cardiology		CARDIOLOGY	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		650.00	
C.	Full Name (Last, First, Middle Initial) John A. Mondelli	•		Date of Receipt
	Mailing Address 1 Bennington Road			$\begin{bmatrix} & M & M & / & D & D & / & Y & Y & Y & Y \\ 0 & 4 & & 0 & 9 & & 2 & 0 & 0 & 8 \end{bmatrix}$
	City	State	Zip Code	Transaction ID: c31e59f5f3a441b184a7
	Morristown	NJ	07960-6125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Morris County Cardiology Consultants		CARDIOLOGY	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		250.00	
	SUBTOTAL of Receipts This Page (optional)			600.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 42   (check only one)   X   11a		
4	Any information copied from such Reports and Starr for commercial purposes, other than using the r	atements mag name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)  American College of Cardiology Politica	al Action Co	ommittee			
۸.	Full Name (Last, First, Middle Initial) Alberto E. Montalvo			Date of Receipt		
	Mailing Address 5928 Riverview Bouleva	ırd		04 14 2008		
	City Bradenton	State FL	Zip Code 34205-8805	Transaction ID: bbad3b006fde4c189b8 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Bradenton Cardiology	Occupatio ADULT (	n CARDIOLOGY			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
3.	Full Name (Last, First, Middle Initial) Alan Morasch Mailing Address 45740 Springshysek Cou			Date of Receipt		
	Mailing Address 15740 Springbrook Cou					
	City Lake Oswego	State OR	Zip Code 98683-5305	Transaction ID: 8c0a45c726ed4e46957  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2500.00		
	Name of Employer Oregon Chapter of theAmer- ican College	Occupation ADMINIS	n STRATION			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2500.00	]		
. –	Full Name (Last, First, Middle Initial) N. N. Morse			Date of Receipt		
	Mailing Address 2400 N Street Northwes Heart House	t		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City Washington	State DC	Zip Code 20037-1152	Transaction ID: 8686e7bffb6e4f3f9e95  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	2007 1102	250.00		
	Name of Employer American College of Cardi- ology		& Legislative Affairs			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00			
	L SUBTOTAL of Receipts This Page (optional)			3250.00		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 24 / 42   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Cardiology Po	olitical Action Co	ommittee	
Full Name (Last, First, Middle Initial) Sanjeev D. Ravipudi			Date of Receipt
Mailing Address 2317 Deer Creek C	ourt		04 04 2008
City Columbia	State MO	Zip Code 65201-3564	Transaction ID: 962279adb5c54c07a59e Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Missouri Cardiovascular Specialists		CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) William H. Resh			Date of Receipt
Mailing Address 2017 Troon Drive			04 07 2008
City	State	Zip Code	Transaction ID: 9dbc8b92976a4e70866
Henderson	NV	89074-0669	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-Employed	Occupatio ADULT (	on CARDIOLOGY	
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) J. William Richardson			Date of Receipt
Mailing Address 1230 Valentine Driv	/e		04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 6e34b4cbd0b242b2858
Dubuque FEC ID number of contributing	IA .	52001-7313	Amount of Each Receipt this Period
federal political committee.	C		250.00
Name of Employer Medical Assocs Clinic PC		CARDIOLOGY	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional	J)		1000.00
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	-		1000

Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephen H. Royal  Mailing Address 6080 Midus Street  City  Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For:  Primary  General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City  State  Summit  FEC ID number of contributing federal political committee.  City  State  NJ  FEC ID number of contributing federal political committee.  Name of Employer  Summit Medical Group  Occupation  Occupation  Aggregat  Occupation	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 42 (check only one)    X
American College of Cardiology Political Action College of Cardiology Political Committee State Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Stephen H. Royal Mailing Address 6080 Midus Street  City State Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  R. Gregory Sachs Mailing Address 92 Mountain Avenue  City State Summit NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation NJ  Comparison Committee.  NJ  Comparison Committee.  NJ  Comparison Committee.  Occupation NJ  Comparison Committee.	ly not be sold or used by any persoldress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Aggregat  City State Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:	ommittee	
City Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For: Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephen H. Royal Mailing Address 6080 Midus Street  City Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs Mailing Address 92 Mountain Avenue  City State Summit NJ  FEC ID number of contributing federal political committee.  C  Name of Employer Summit Medical Group  Occupation C  C  C  Occupation Aggregat  Occupation Aggregat  Occupation C  C  Occupation C  Occupatio		Date of Receipt
Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephen H. Royal Mailing Address 6080 Midus Street  City State Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State Summit  FEC ID number of contributing federal political committee.  City State NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT		04 04 2008
FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephen H. Royal Mailing Address 6080 Midus Street  City State Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State  NJ  FEC ID number of contributing federal political committee.  City State  NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit  NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT	Zip Code	Transaction ID: 2c912e0134474c7f9e8
Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephen H. Royal  Mailing Address 6080 Midus Street  City  Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary  General  Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address  Mailing Address  Mailing Address  Packet Summit  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address  Mailing Address  Mailing Address  Packet Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit  NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT	28348-9785	Amount of Each Receipt this Period
P.A. Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial) Stephen H. Royal  Mailing Address 6080 Midus Street  City  Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary  General  Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City  Summit  FEC ID number of contributing federal political committee.  City  Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupating Occupating Occupating Occupating Occupating Occupating Occupating Occupating Occupating		250.00
Receipt For:  Primary  Other (specify)  Full Name (Last, First, Middle Initial) Stephen H. Royal  Mailing Address 6080 Midus Street  City  Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For:  Primary  Other (specify)  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City  Summit  FEC ID number of contributing federal political committee.  City  Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation  Occupation  Occupation  Occupation  Occupation  ADULT	on CARDIOLOGY	
Full Name (Last, First, Middle Initial) Stephen H. Royal Mailing Address 6080 Midus Street  City State Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For: Aggregat Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs Mailing Address 92 Mountain Avenue  City State Summit  FEC ID number of contributing federal political committee.  C C  State NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT	e Year-to-Date ▼	
Stephen H. Royal  Mailing Address 6080 Midus Street  City State  Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For: Aggregat  Other (specify) ▼  Full Name (Last, First, Middle Initial)  R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State  Summit NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT	500.00	
City State Hope Mills NC  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A. Receipt For: Aggregat Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit C C C C C C C C C C C C C C C C C C C		Date of Receipt
Hope Mills  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State  Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs Mailing Address 92 Mountain Avenue  City State NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupatic ADULT	Zip Code	Transaction ID: 57bde5e759e6435983
Name of Employer Southeastern Cardiology, P.A. Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs Mailing Address 92 Mountain Avenue  City State Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupatic ADULT	28348-9785	Amount of Each Receipt this Period
Southeastern Cardiology, P.A.  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupatic ADULT		250.00
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) R. Gregory Sachs Mailing Address 92 Mountain Avenue  City State Summit FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Aggregat  Aggregat  Occupation  Aggregat  Occupation  Aggregat  Occupation  Occupation  ADULT	on CARDIOLOGY	
R. Gregory Sachs  Mailing Address 92 Mountain Avenue  City State Summit NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT	e Year-to-Date ▼ 500.00	
Mailing Address 92 Mountain Avenue  City State Summit NJ  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT		Date of Receipt
Summit  FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Summit Medical Group  Occupation ADULT	Zip Code	Transaction ID: a7ee60da64e6442ab3
Name of Employer Summit Medical Group  Occupation ADULT	07922-2104	Amount of Each Receipt this Period
Summit Medical Group ADULT		500.00
<del></del>	on CARDIOLOGY	7
	e Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

TOTAL This Period (last page this line number only) .....

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 42 (check only one)    X   11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	e name and addr	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Gregory C. Sampognaro Mailing Address 2503 Point Drive  City Monroe  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General		Zip Code 71201-2987  NTIONAL CARDIOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 7 2 0 0 8  Transaction ID: 921ce416399b4823b7c6  Amount of Each Receipt this Period  500.00
В.	Other (specify) ▼  Full Name (Last, First, Middle Initial) Pillutla V. Sastry  Mailing Address 100 Bentley Avenue  City  Jersey City  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:  Primary General  Other (specify) ▼	State NJ C Occupation INTERNA Aggregate		Date of Receipt  M M M O T D D O T D D O T
<b>C</b> .	Full Name (Last, First, Middle Initial) Richard P. Seher  Mailing Address PO Box 10701  City Reno  FEC ID number of contributing federal political committee.  Name of Employer Reno Heart PhysiciansElm Street Profes Receipt For:  Primary General Other (specify)		Zip Code 89503-4541 ARDIOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			1000.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
NAN	ormation copied from such Reports and ommercial purposes, other than using the OF COMMITTEE (In Full) erican College of Cardiology Polit			on for the purpose of soliciting contributions solicit contributions from such committee.
Full M. E	Name (Last, First, Middle Initial) Eugene Sherman ing Address 5110 South Hanover			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC	glewood C ID number of contributing eral political committee.	State CO	Zip Code 80011-6742	Transaction ID: d7c558df71834875914.  Amount of Each Receipt this Period  2501.00
Nam Auro PC	ne of Employer ora Medical Associates, eipt For: Primary General Other (specify)	Occupatio INTERVI	n ENTIONAL CARDIOLOGY e Year-to-Date ▼ 2501.00	
3. Chitt	Name (Last, First, Middle Initial) tur A. Sivaram ing Address 1616 Boomer Trail N PO Box 26901	orth		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State OK	Zip Code 73190-0001	Transaction ID: 9762b56e0ae44c5386c  Amount of Each Receipt this Period  2500.00
Nam Univ DV	eral political committee.  The of Employer versity of Oklahoma & A Medical C eipt For:  Primary General  Other (specify) ▼	Occupatio ADULT (	n CARDIOLOGY e Year-to-Date ▼	Refunded on 4/16/08
Rich	Name (Last, First, Middle Initial) nard W. Snyder ing Address 5514 Yolanda			Date of Receipt
		State TX	Zip Code 75230-2500	Transaction ID: 647364a7846c496bba0  Amount of Each Receipt this Period  2500.00
Nam Hea	ne of Employer urt Place eipt For: Primary General		n ENTIONAL CARDIOLOGY Year-to-Date ▼ 2500.00	
SUBTO	Other (specify) ▼  OTAL of Receipts This Page (optional)		0 0 0 0 0 0 0	7501.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 42 (check only one)    X   11a
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements made and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Cardiology Politi	ical Action Co	ommittee	<u>-</u>
	Full Name (Last, First, Middle Initial) Mark D. Stewart			Date of Receipt
	Mailing Address 2400 N Street Northw Heart House	est		0 4
	City Washington	State DC	Zip Code 20037-1152	Transaction ID: 37391ab3849b4687ab Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer American College of Cardi- ology		e-Based Medicine	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Richard F. Terry			Date of Receipt
	Mailing Address 8 Highland Park			0 4 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Wheeling	State WV	Zip Code 26003-5406	Transaction ID: ded79a666ddd4dcfac Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self-Employed	Occupatio	n CARDIOLOGY	
	Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Michael C. Turner			Date of Receipt
	Mailing Address 5140 Highway 397			0 4 1 4 2 0 0 8
	City Bell City	State LA	Zip Code 70601-5727	Transaction ID: 123a1a1584b04f55bb
	FEC ID number of contributing federal political committee.	C	7 000 072	250.00
	Name of Employer Cardiovascular Specialists of Southwes	_ '	CARDIOLOGY	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
٦	SUBTOTAL of Receipts This Page (optional) .			650.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Cardiology Po	nd Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) William R. Vetter Mailing Address 5301 F Street Suite City Sacramento FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary Other (specify)		Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 0 5 2 0 0 8  Transaction ID: 74a4941f93fa423ca764  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Michael A. Votaw  Mailing Address 2400 N St NW  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer American College of Cardiology  Receipt For:  Primary General  Other (specify)   General	State Zip Code DC 20037-1152  C  Occupation Division, V.P., F&O  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Howard T. Walpole Mailing Address 31 Northumberland City Nashville FEC ID number of contributing federal political committee.  Name of Employer Saint Thomas Health Services Receipt For: Primary General Other (specify)	State Zip Code TN 37205-2018  C  Occupation INTERVENTIONAL CARDIOLOGY Aggregate Year-to-Date  3502.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	3002.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 42   (check only one)
4	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Cardiology Politi	cal Action Co	ommittee	
۵.	Full Name (Last, First, Middle Initial)  Mary N. Walsh			Date of Receipt
	Mailing Address 428 West 83rd Place			0 4
	City Indianapolis	State IN	Zip Code 46260-1992	Transaction ID: 4f9ca7295398b16015ee Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer The Care Group LLC	_ '	FAILURE/TRANSPLANT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
_ 3.	Full Name (Last, First, Middle Initial) Michael C. Widmer			Date of Receipt
	Mailing Address 2753 Northeast Red C	Dak Drive		0 4
	City Bend	State OR	Zip Code 97701-8348	Transaction ID: 25a4aec56c12431ca20  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Heart Center Cardiology	Occupatio ADULT (	n CARDIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_ ).	Full Name (Last, First, Middle Initial) Joseph S. Wilson			Date of Receipt
	Mailing Address 755 Mount Vernon Hig	ghway Suite	530	0 4 1 4 2 0 0 8
	City	State	Zip Code	Transaction ID: 5214038d331142719b9
	Atlanta  FEC ID number of contributing federal political committee.	GA C	30328-4287	Amount of Each Receipt this Period  500.00
	Name of Employer Cardiology of Georgia, P C.	Occupatio ADULT (	n CARDIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 42 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Cardiology Po	nd Statements may not be sold or used by any person the name and address of any political committee to	
Full Name (Last, First, Middle Initial) John H. Windsor Mailing Address 745 Augsborg Aver  City Bismarck  FEC ID number of contributing federal political committee.  Name of Employer Heart & Lung Clinic	State Zip Code ND 58501-4516  C Occupation ADULT CARDIOLOGY	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Stuart A. Winston	Aggregate Year-to-Date ▼ 400.00	Date of Receipt
Mailing Address 3055 Cottontail Ct  City  Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer Michigan Heart, P. C.Michigan Heart & Receipt For:	State Zip Code MI 48103-1775  C  Occupation ELECTROPHYSIOLOGY Aggregate Year-to-Date	Transaction ID: 54bd895854c74ef7924  Amount of Each Receipt this Period  250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Michael J. Wolk Mailing Address 876 Park Avenue  City New York	State Zip Code NY 10021-8722	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer New York Cardiology Associates Receipt For: Primary General Other (specify)	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   333.32	Amount of Each Receipt this Period  83.33
SUBTOTAL of Receipts This Page (optional	L (k	433.33

A.

### **SCHEDULE A (FEC Form 3X)**

Other (specify)

FOR LINE NUMBER: PAGE 32/42 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Cardiology Political Action Committee Full Name (Last, First, Middle Initial) Samuel H. Zimmern Date of Receipt Mailing Address 3601 Knapdale Lane 0.4 09 2008 City State Zip Code Transaction ID: 221b6c1ecf3049599489 Charlotte NC 28203-5863 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Sanger Clinic, PA Occupation **ELECTROPHYSIOLOGY** Receipt For: Aggregate Year-to-Date Primary General

250.00

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	<u> </u>	44738.33

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 42 (check only one)  11a 11b 11c 12 13 14 X 15 16 17
Ar or	ny information copied from such Reports and Statemer for commercial purposes, other than using the name a	ents may and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\angle$	NAME OF COMMITTEE (In Full)			
/	American College of Cardiology Political Acti	tion Co	mmittee	
	Full Name (Last, First, Middle Initial) American College of Cardiology - Admin Account			Date of Receipt
	Mailing Address P.O. Box 85024			04 15 2008
	City	tate	Zip Code	Transaction ID: 91a013f91ddb6294a60
	Richmond V/	<u>′A</u>	23285-5024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			462.21
	Name of Employer Occ	cupation		Remimburse for Mar. Amex and Apr. Merchant Fees
	Receipt For:  Primary  General  Other (specify) ▼	gregate	Year-to-Date ▼ 2271.94	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	462.21
TOTAL This Period (last page this line number only)	<b>•</b>	462.21

SCHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)				NUMBE	ER:			РА	GE	34 / 4	2
ITEMIZED DISBURSEMENTS	for each o	category of the Summary Page		X	eck only 21b 27	22 28a	П	23 28b		24 28c		25 29	20
Any Information copied from such Reports and Stateme													
or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)	and addres	ss of any political	COII	ımıtte	e to so	licit cont	ributi	ions ir	om st	ich c	Omm	iittee	
American College of Cardiology Political Ac	ction Com	mittee											
Full Name (Last, First, Middle Initial) American Express								on ID			 eb89	e1ba	20bc
Mailing Address PO Box 53852						o <sup>M</sup> 4	М	/ D3	3 O	/ Y	ž	8 Ď 0	Y
	State AZ	Zip Code 85072-3852				Amo	unt o	f Each	Disb	urser		this P	
Purpose of Disbursement April Amex Fees				001							2	250.3	1
Candidate Name			С	atego Type	,								
Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼											
State: District:													
Full Name (Last, First, Middle Initial) Merchant Services					Transact Date of D			isburs	emen				
Mailing Address 7300 Chapman Hwy						o <sup>M</sup> 4	М	<sup>/</sup> DC	2	/ L	ž	0 ŏ 8	<u> </u>
Knoxville	State TN	Zip Code 37920				Amo	unt o	f Each	Disb	urser	nent	this P	-
Purpose of Disbursement April Merchant Fees Candidate Name				001 atego	n/			-			•	10.00	,
Sandadio Namo			Ü	Type	-								
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spe	General cify) ▼											
Full Name (Last, First, Middle Initial) SunTrust Merchant Services								on ID			-012	20508	0747
Mailing Address PO Box 6600						0 <sup>M</sup> 4	М	/ D	0	/ Y	ž	0 ŏ 8	Y
	State MD	Zip Code 21741				Amo	unt o	f Each	Disb	urser	-	this P	-
Purpose of Disbursement April Merchant Fees	April Merchant Fees							•			2	25.60	j ,
Candidate Name			Category/ Type										
Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼											
State: District:		· 											
SUBTOTAL of Disbursements This Page (optional)					<u> </u>						4	85.97	7
TOTAL This Period (last page this line number only) .					•								

State:

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	CHEDULE B	•	Use sepa		R LIN		UMBE	R:			PA	35 / 4	12					
H	EMIZED DIS	BURSEMEN	TS		category of the Summary Page		X	21b 27	H	22 28a	П	23 28b		24 28c		25 29		26 30b
	y Information copied for commercial purpo			•		-	•	•			•			_				
/	NAME OF COMMI	` ,																
/	American Colleg	e of Cardiology	Political Ad	ction Com	ımittee													
	Full Name (Last, Fin Wachovia Bank									Date o		sburs	_	9204 nt		89398 0 ŏ 8		5619
	Mailing Address	C/O Nova Infor 7300 Chapman		stems						0 4			2			0 0 0		
	City Knoxville	·		State TN	Zip Code 37920					Amou	nt of	Each	Dis	burser	nen		-	d
	Purpose of Disburs April Merchant Fees						00	1								82.8	9	
	Candidate Name					1	ateg Typ	ory/ e										
	Office Sought:	House Senate President	Disburser	nent For: Primary Other (spe	General													

		82.80
SUBTOTAL of Disbursements This Page (optional)		82.89
TOTAL This Period (last page this line number only)	•	568.86

	ENTER DISPURSEMENTS	Use separate schedule(	s)		R LINE eck only		٠				3E 36/	72
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	$\square$	24 28c	25 29	26 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)  American College of Cardiology Political A	e and address of any politic										s
L		action committee										
۸.	Full Name (Last, First, Middle Initial)  Charles Boustany Jr MD for Congress Inc  Mailing Address PO Box 80126					Date of		sburs			idb895a 2 0 0	
	City LaFayette	State Zip Code LA 70598				Amou	nt of	Each	n Disb	ursen	nent this	Period
	Purpose of Disbursement 2008 Primary Candidate Name		_	011 ateg							2500.0	00
		ement For: 2008 Primary General Other (specify)		Тур	9							
 B.	Full Name (Last, First, Middle Initial) Christopher Shays for Congress Committee Mailing Address 98 East Avenue Rear Bu					Date of		sburs			56e101	_
	City Norwalk	State Zip Code CT 06851				Amou	nt of	Each	n Disb	ursen	nent this	
	Purpose of Disbursement 2008 Primary Candidate Name		Ca	011 ateg	ory/		•			•	2500.0	00
	X X	ement For: 2008 Primary Genera Other (specify)		Тур	9							
	Full Name (Last, First, Middle Initial)  Committee for Hispanic Causes/Building (Diversity PAC (CHC BOLD PAC)	Our Leadership				Date o		sburs	emen		8d4d50	V
	Mailing Address 1831 Bay Street SE					0 4		2	2 9	L	200	8
	City Washington	State Zip Code DC 20003				Amou	nt of	Each	n Disb	ursen	nent this	
	Purpose of Disbursement 2008 Contribution Candidate Name		Ca	011 atego Typo	ory/					•	1000.0	00
				110								
	Senate	ement For: 2008 Primary Genera Other (specify)										

В.

C.

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR	LINE	NE NUMBER: PAGE 37 / 42										
ITEMIZED DISBURSEMENTS	SURSEMENTS for each category of the (Check				eck only one) 21b  22									
	Detailed Summary Page			22 28a	H	23 28b	ŀ	24 28c	$\vdash$	25 29	26 30b			
Any Information copied from such Reports and Stater	nents may not be sold or used by				ırpos		sol		ontril					
or for commercial purposes, other than using the name	e and address of any political co	mmittee	to sol	cit cont	ributi	ions f	ror	n such	comr	nittee				
NAME OF COMMITTEE (In Full)	ation Committee													
American College of Cardiology Political A	action Committee													
Full Name (Last, First, Middle Initial) Continuing a Majority Party Action Comm	ttee (CAMPAC)			Trans Date		isbur	ser	nent	592	3999	5defbc			
Mailing Address 5915 Eastman Avenue S	Suite 100			Amount of Each Disbursement this Period										
City Midland	State Zip Code MI 48640													
Purpose of Disbursement 2008 Contribution		011	7	L.					2	500.0	0			
Candidate Name	C	Category Type	/											
Senate President X	ement For: 2008 Primary General Other (specify)													
State: District: Contrib	oution													
Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc				Date	of D	isbur	ser	nent			d9d104			
Mailing Address PO Box 2918				0 4	М	/ D	3 (	ס / L	Ž	0 0 8	3			
City Raleigh	State Zip Code NC 27602			Amou	ınt o	f Eac	h [	Disburse	-					
Purpose of Disbursement 2008 Primary	'								1	0.000	0			
Candidate Name Elizabeth Dole		Category Type	/											
9 🗎 –	ement For: 2008 Primary General Other (specify)													
State: NC District:														
Full Name (Last, First, Middle Initial) Engel for Congress				Date	of D	isbur	ser	nent	ba8	64f3b	abed9			
Mailing Address 462 California Road				0 <sup>M</sup> 4	М	/ D	2 9	9 /	Ź	0 0 8	3 Y			
City Bronxville	State Zip Code NY 10708			Amou	ınt o	f Eac	h [	Disburse	-					
Purpose of Disbursement 2008 Primary									2	500.0	0			
Candidate Name Eliot L. Engel		Category Type	/											
Senate X President	ement For: 2008 Primary General Other (specify)													
State: NY District: 17														
SUBTOTAL of Disbursements This Page (optional)			<u> </u>				-		60	0.00	0			
TOTAL This Period (last page this line number only			•	L.										

SCHEDULE B (FEC Form 3)	· I I I I I I I I I I I I I I I I I I I								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 X 23 28a 28b	24 25 26 28c 29 30k					
Any Information copied from such Reports and or for commercial purposes, other than using the such as			or the purpose of sol	iciting contributions					
NAME OF COMMITTEE (In Full)  American College of Cardiology Pol	tical Action Committee								
Full Name (Last, First, Middle Initial)  Every Republican Is Crucial (ERICF	Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC)								
Mailing Address 25 East Main Stre	et, Suite 200		04	2008					
City Richmond	State Zip Code VA 23219		Amount of Each D	Disbursement this Period					
Purpose of Disbursement 2008 Contribution		011		1500.00					
Candidate Name	Sieleuwa arrasat Farr	Category/ Type							
Senate President	isbursement For: 2008 Primary General X Other (specify)								
Full Name (Last, First, Middle Initial)	Contribution		Transaction ID: 4	4a748cc22955ab28476					
Friends of Gordon Smith  Mailing Address 228 S Washington	Ste 115		Date of Disburser	D / Y Y Y Y					
City	State Zip Code		Amount of Each D	Disbursement this Period					
Alexandria Purpose of Disbursement	VA 22314			2500.00					
2008 Primary Candidate Name Gordon H. Smith		011 Category/ Type							
Office Sought:    House       X   Senate       President     State: OR   District:	Disbursement For: 2008  X Primary General  Other (specify) ▼	1 21							
Full Name (Last, First, Middle Initial) Friends of John Boehner			Date of Disbursen	80df129846a3f7f3c70 nent					
Mailing Address 7908-I2 Cincinnat	Dayton Road		04 / 29	9 2008					
City West Chester	State Zip Code OH 45069		Amount of Each D	Disbursement this Period					
Purpose of Disbursement 2008 General		011		5000.00					
Candidate Name John A. Boehner		Category/ Type							
Office Sought: X House Senate President State: OH District: 08	Disbursement For: 2008  Primary X General  Other (specify) ▼								
SUBTOTAL of Disbursements This Page (o	otional)	<b>&gt;</b>		9000.00					
TOTAL This Period (last page this line numb	er only)								

		3 (FEC Form 3X)	Use separate schedule(s)			NUMBE y one)	ER:		PAGE	39 / 4	42	
		SBURSEMENTS	Detailed	category of the Summary Page	À	21b 27	22 28a	X 23	3b 2	24 28c	25 29	
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	,	First, Middle Initial) orting Buyer for Congre	ss						ID: 8dbf ursement		1bf82	38a
Ī	Mailing Address	200 North Main St. F	O Box 712				0 <sup>M</sup> 4	M /	29	Y	8 0 0	3 Y
	City Monticello		State IN	Zip Code 47960			Amo	unt of E	ach Disbu			-
	Purpose of Disbu 2008 Primary	rsement			011		L.	-		1	500.0	0
	Candidate Name Stephen E. Buy	yer			atego Type	-						
	Office Sought:	Senate President	oursement For:  X Primary Other (sp	2008 General ecify)								
	State: IN	District: 04 First, Middle Initial)										
	John Kerry for						Date	of Disb	ID: 9dc9 ursement			
Ī	Mailing Address	10 G Street NE Suite 710					0 <sup>M</sup> 4	W /	<sup>D</sup> 2 9 /		8 0 0	3 '
	City Washington		State DC	Zip Code 20002			Amo	unt of E	ach Disbu	ırsemer	nt this F	Peric
	Purpose of Disbu 2008 General	rsement			011		L.	-		2	500.0	0
	Candidate Name John F. Kerry				atego Type	•						
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ı	Full Name (Last,	First, Middle Initial) or Congress Inc							ID: 2016 ursement		5abbd	1872
Ī	Mailing Address	Post Office Box 4708	340				o <sup>M</sup> 4	M /	<sup>D</sup> 2 9 /	Y	8 0 0	3 Y
	City Tulsa		State OK	Zip Code 74147			Amo	unt of E	ach Disbu	ırsemer	nt this F	Perio
2	Purpose of Disbu 2008 Primary	rsement			011		L.			. 1	0.000	0
	Candidate Name John Sullivan				atego Type	-						
(	Office Sought:	X House Dist Senate President	oursement For:  X Primary Other (sp	2008 General ecify)								
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			onal)					-			0.00	_

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EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	X 23 28b		24 28c	25 29	F	26 30	
ny Information copied from such Reports and State										
for commercial purposes, other than using the na	ne and address of any politica	ai comr	nittee to s	olicit contr	ibutions tr	om s	sucn c	ommittee	!	
NAME OF COMMITTEE (In Full) American College of Cardiology Political	Action Committee									
American College of Cardiology Folitical	Action Committee									
Full Name (Last, First, Middle Initial)				Trans	action ID	: a3	hbe5a	430409	744	996
Keller for Congress					of Disburs					
Mailing Address PO Box 1453				0 <sup>M</sup> 4	M / D	2 9	/ Y	ž 0 0	8 <sup>Y</sup>	
10 DOX 1455										
City	State Zip Code			Amou	nt of Each	n Dis	burser	ment this	Perio	od
Orlando	FL 32802				•			1000.0	nn	
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Candidate Name			tegory/							
Ric Keller		1	ype							
	sement For: 2008									
	Y Primary General									
State: FL District: 08	Other (specify)									
Full Name (Last, First, Middle Initial)				T		. 04	41504	50-10111	=	
Nathan Deal for Congress					action ID of Disburs	-		ouaremit	baas	j
		M		2 9	/ Y	ž 0 0	ΩY			
Mailing Address PO Box 902				0 4		29		200	8	
City	State Zip Code			Amou	nt of Each	n Dis	burser	ment this	Perio	
Gainesville	GA 30503									
Purpose of Disbursement				L.				2500.0	00	
2008 General			011							
Candidate Name Nathan Deal			tegory/ ype							
Office Sought: X House Disbur	sement For: 2008	<u> </u>	,,,,	-						
Senate	Primary X General									
President	Other (specify)									
State: GA District: 09										
Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee				1	action ID of Disburs			184e540	)28f1	d5
Tele Stark He-Election Committee							IIL   /   Y	YY	Υ	
Mailing Address PO Box 8331				0 <sup>M</sup> 4		2 9	L	žoŏ	8	
City	State Zip Code			Ame	nt of Each	Dic.	huraar	mont this	Dor!	
Fremont	CA 94537			Amou	nt of Each	ı DIS	burser	neni inis	rerio	JU
Purpose of Disbursement								3000.0	00	
2008 Primary			011							
Candidate Name Pete Stark			tegory/							
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President	Other (specify)									
State: CA District: 13										
SUBTOTAL of Disbursements This Page (optiona	)		▶					6500.0	00	
<b>FOTAL</b> This Period (last page this line number only	y)		🕨							

ΙΤ	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENT	S for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 27	22 X 23 24 28a 28b 28c	25 26 29 30b
	y Information copied from such Reports a or commercial purposes, other than using					
$\rangle$	NAME OF COMMITTEE (In Full) American College of Cardiology Po	olitical Action Con	nmittee			
	Full Name (Last, First, Middle Initial) Richard E Neal for Congress Com Mailing Address 76 Magnolia Terr				Transaction ID: 33be38505e Date of Disbursement	2039629fa
	City Springfield Purpose of Disbursement 2008 Primary Candidate Name Richard E. Neal	State MA	Zip Code 01108	011 Category/	Amount of Each Disbursement	this Period 00.00
	Office Sought:  X House Senate President State: MA District: 02	Disbursement For:  X Primary Other (spe	2008 General	Туре		

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	1000.00
TOTAL This Period (last page this line number only)	<u> </u>	33500.00

SCHEDULE B (FEC Form $3X$ )						FOR LIN	OR LINE NUMBER: PAGE 42 / 42								
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$\rangle$	NAME OF COMMI American Colleg	TTEE (In Full) le of Cardiology P	olitical Acti	on Com	nmittee										
	Full Name (Last, Fin Chittur A Sivaran Mailing Address	n 1616 Boomer Ti	rail North							Disburs				4904 0 0̇́8	966354 Y
	City Edmond Purpose of Disburs Refund	PO Box 26901 ement	Sta Ol		Zip Code 73190-00	001	010	A [	moun	t of Eac	h Dis	burser		this P	
	Candidate Name  Office Sought:	House Senate President		ent For: rimary ther (spe	☐ Gene	eral	Category/ Type								
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SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	2500.00
TOTAL This Period (last page this line number only)	<b>—</b>	2500.00